

## **Senate Bill No. 1807**

### **CHAPTER 815**

An act to add Section 11877.2 to, and to add Chapter 9.8 (commencing with Section 11545) to Division 10 of, the Health and Safety Code, and to add Section 1000.8 to the Penal Code, relating to addiction.

[Approved by Governor September 28, 2000. Filed  
with Secretary of State September 28, 2000.]

#### **LEGISLATIVE COUNSEL'S DIGEST**

**SB 1807, Vasconcellos. Addiction: treatment.**

Existing law provides that it is the policy of the state to encourage each county and city and county to make use, whenever applicable, of testing procedures to determine addiction to controlled substances or the absence thereof, and to foster research in means of detecting the existence of addiction to controlled substances and in medical methods and procedures for that purpose.

This bill would, in addition, make a legislative finding and declaration that licensed physicians, experienced in the treatment of addiction, should be allowed and encouraged to treat addiction by all appropriate means.

Under existing law, the State Department of Alcohol and Drug Programs is responsible for licensing narcotic treatment programs to use replacement narcotic therapy in the treatment of addicted persons whose addiction was acquired or supported by the use of a narcotic drug or drugs, not in compliance with a physician and surgeon's legal prescription. The department is authorized to license narcotic treatment programs on an inpatient or outpatient basis, or both.

This bill would require the department to establish a program for the operation and regulation of office-based opiate treatment programs that would either be affiliated and associated with a primary licensed narcotic treatment program or hold a primary narcotics treatment program license.

Existing law authorizes the court to defer the entry of judgment of defendants who plead guilty to certain drug offenses and to dismiss the criminal charges if the defendant successfully completes a deferred entry of judgment program. Existing law also authorizes the court to suspend criminal proceedings without a guilty plea for designated defendants under a preguilty plea drug court program.

Existing law requires that all referrals for deferred entry of judgment granted by the court be only to programs certified by the county drug program administrator.

This bill would authorize any person who is participating in a deferred entry of judgment program or a preguilty plea program to also participate in a licensed methadone or levoalphacetylmethadol (LAAM) program if certain conditions are met.

*The people of the State of California do enact as follows:*

SECTION 1. Chapter 9.8 (commencing with Section 11545) is added to Division 10 of the Health and Safety Code, to read:

CHAPTER 9.8. TREATMENT

11545. The Legislature hereby finds and declares that licensed physicians, experienced in the treatment of addiction, should be allowed and encouraged to treat addiction by all appropriate means.

SEC. 2. Section 11877.2 is added to the Health and Safety Code, to read:

11877.2. (a) The department shall establish a program for the operation and regulation of office-based opiate treatment programs. An office-based opiate treatment program established pursuant to this section shall meet either of the following conditions:

(1) Hold a primary narcotics treatment program license.

(2) Be affiliated and associated with a primary licensed narcotics treatment program. An office-based opiate treatment program meeting the requirement of this paragraph shall not be required to have a separate license from the primary licensed narcotics treatment program with which it is affiliated and associated.

(b) For purposes of this section, “office-based opiate treatment program” means a program in which interested and knowledgeable physicians provide addiction treatment services, and in which community pharmacies supply necessary medication both to these physicians for distribution to patients and through direct administration and specified dispensing services. Nothing in this section is intended to expand the scope of the practice of pharmacy.

(c) Notwithstanding any other provision of law or regulation, including Section 10020 of Title 9 of the California Code of Regulations, an office-based opiate treatment program in a remote site, that is affiliated and associated with a licensed narcotics treatment program, may be approved by the department, if all of the following conditions are met:

(1) A physician may provide office-based addiction services only if each office-based patient is registered as a patient in the licensed narcotic treatment program and both the licensed narcotic treatment program and the office-based opiate treatment program ensure that all services required under Chapter 4 (commencing with Section 10000) of Division 4 of Title 9 of the California Code of



Regulations for the management of opiate addiction are provided to all patients treated in the remote site.

(2) A physician in an office-based opiate treatment program may provide treatment for a maximum of 20 patients under the appropriate United States Drug Enforcement Administration registration. The primary licensed narcotics treatment program shall be limited to its total licensed capacity as established by the department, including the patients of physicians in the office-based opiate treatment program.

(3) The physicians in the office-based opiate treatment program shall dispense or administer pharmacologic treatment for opiate addiction that has been approved by the federal Food and Drug Administration such as levoalphacetylmethadol (LAAM) or methadone.

(4) Office-based opiate treatment programs, in conjunction with primary licensed narcotics treatment programs, shall develop protocols to prevent the diversion of methadone. The department may develop regulations to prevent the diversion of methadone.

(d) For purposes of this section, “remote site” means a site that is geographically or physically isolated from any licensed narcotic treatment program. Therefore, the requirements in this subdivision regarding a remote site do not apply to an office-based opiate treatment program that holds a primary narcotics treatment license.

(e) In considering an office-based opiate treatment program application, the department shall independently weigh the treatment needs and concerns of the county, city, or areas to be served by the program.

SEC. 3. Section 1000.8 is added to the Penal Code, to read:

1000.8. (a) Where a person is participating in a deferred entry of judgment program or a preguilty plea program pursuant to this chapter, the person may also participate in a licensed methadone or levoalphacetylmethadol (LAAM) program if the following conditions are met:

(1) The sheriff allows a methadone program to operate in the county jail.

(2) The participant allows release of his or her medical records to the court presiding over the participant’s preguilty or deferred entry program for the limited purpose of determining whether or not the participant is duly enrolled in the licensed methadone or LAAM program and is in compliance with deferred entry or preguilty plea program rules.

(b) If the conditions specified in paragraphs (1) and (2) of subdivision (a) are met, participation in a methadone or LAAM treatment program shall not be the sole reason for exclusion from a deferred entry or preguilty plea program. A methadone or LAAM patient who participates in a preguilty or deferred entry program shall comply with all court program rules.



(c) A person who is participating in a deferred entry of judgment program or preguilty plea program pursuant to this chapter who participates in a licensed methadone or LAAM program shall present to the court a declaration from the director of the methadone or LAAM program, or the director's authorized representative, that the person is currently enrolled and in good standing in the program.

(d) Urinalysis results that only establish that a person described in this section has ingested or taken the methadone administered or prescribed by a licensed methadone or LAAM program shall not be considered a violation of the terms of the deferred entry of judgment or preguilty plea program under this chapter.

(e) Except as provided in subdivisions (a) to (d), inclusive, this section shall not be interpreted to amend any provisions governing deferred entry and diversion programs.

